

EXHIBIT 4

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1 IN THE DISTRICT COURT OF
2 TRAVIS COUNTY, TEXAS
3 201st JUDICIAL DISTRICT
4

5 THE STATE OF TEXAS
6 ex rel.
7

8 VEN-A-CARE OF THE
9 FLORIDA KEYS, INC.,

Plaintiffs,

10 v. Cause No. GV401286
11 ABBOTT LABORATORIES,
12 INC., et al.,

Defendants.

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15 VIDEOTAPED DEPOSITION OF
16 MATTHEW PERRI
17 VOLUME I
18

19 August 20, 2007
20 8:06 a.m.

21 1420 Peachtree Street, N.E.
22 Suite 800
23 Atlanta, Georgia
24

25 Lee Ann Barnes, RPR

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22 Also Present:

23 Keith Neal, Videographer

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1 opinion is -- is based primarily on my
2 review of the documents that focused
3 heavily on the multisource products.

4 Other products were included that
5 were not necessarily multisource generic
6 products. I looked through carefully
7 many, many pages of documents where
8 prices for other products were concerned,
9 and in some cases I found and some cases
10 I did not find large discrepancies in the
11 list price.

12 Again, I think that -- it's
13 consistent with what I've been saying,
14 that not all products had list prices
15 that were much higher and created high
16 AWP's.

17 Q. (By Mr. Cook) So are you expressing
18 an opinion in this case regarding the purpose
19 for which Abbott set list prices for
20 non-multiple-source drugs?

21 MR. WINTER: Objection; form.

22 THE WITNESS: I don't want to
23 exclude them if -- if there are documents
24 I can go to to formulate that opinion.

25 But I do not have a specific

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1 recollection of the exact pricing levels
2 for drugs like Depakote and Biaxin and
3 Synthroid presently.

4 Q. (By Mr. Cook) What is your
5 opinion -- you may review whatever documents
6 you would like. What is your opinion
7 regarding the reason for which Abbott reported
8 list prices for its non-multiple-source drugs?

9 MR. BREEN: Objection; form.

10 THE WITNESS: I think one reason --
11 and again, I -- I do not have a specific
12 recollection of the levels of these
13 prices as we sit here right now -- but,
14 for example, a product like Biaxin or
15 Synthroid, to leverage the full breadth
16 of your product line, if you make those
17 products even slightly more appealing by
18 virtue of a larger spread or whatever the
19 mechanism you -- you're employing to make
20 them more appealing, that would be a
21 benefit to your ultimate customers.

22 Whether they were benefiting as much
23 as they were on a multisource product, I
24 don't know. But that would make the full
25 product line more attractive to those

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1 customers.

2 And one of the things we talked
3 about earlier was that Abbott valued its
4 ability to market a full product line.

5 Q. (By Mr. Cook) You would agree with
6 me that your report and its conclusions are
7 stated in the affirmative; correct?

8 MR. BREEN: Objection; form.

9 Q. (By Mr. Cook) Please feel free to
10 refer to the conclusions in your report.

11 A. Yes, I think that's true.

12 Q. You don't say what might be;
13 correct?

14 A. Correct.

15 Q. So I'm asking: The opinions in your
16 report, can you tell me the extent to which
17 those opinions apply to non-multiple-source
18 drugs?

19 A. To the extent that any of those
20 drugs might have had an inflated AWP reported.

21 Q. Again, your conclusion on page 38
22 contains the expressed opinion that Abbott
23 established, quote, artificially high WACs,
24 list prices, and AWPs to create large spreads,
25 closed quote, and you opine that Abbott

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1 marketed the spread.

2 My question to you is: Do those
3 opinions apply to the non-multiple-source
4 drugs at issue in this case?

5 MR. WINTER: Objection; form.

6 THE WITNESS: I think I have to
7 answer that, again, the way I just did,
8 is to the extent that those products,
9 when I reviewed the documents, were found
10 to have a large spread, that then that
11 opinion would apply to that -- that
12 product.

13 Q. (By Mr. Cook) You testified earlier
14 that it was part of your opinion that you
15 concluded that Abbott reported high list
16 prices, high WACs, and high AWP; correct?

17 A. Yes.

18 Q. For which non-multiple-source drugs
19 did you conclude Abbott reported high WACs,
20 high list prices, and high AWP?

21 A. Some of their branded erythromycin
22 products.

23 Q. Could you please give me a
24 comprehensive list of the non-multiple-source
25 drugs for which you concluded Abbott reported

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1 a high WAC, a high list price, or a high AWP?

2 A. The best list I can give you right
3 now would include erythromycin, EDS products,
4 I think Synthroid.

5 And the reason I say Synthroid is
6 because I've seen contract pricing for
7 Synthroid and am aware that there is a generic
8 competitor in the marketplace. So I'm not
9 sure if you're considering Synthroid or
10 erythromycin a single-source product or not.
11 They -- they are branded products, but there
12 are competitors available.

13 And other than that, I'm going to --
14 I'm going to leave that as my list.

15 Q. Thank you.

16 A little while ago, we were talking
17 about the spread between high list price, at
18 which a multiple drug may have very few sales,
19 and the lower price, the contract price, at
20 which the vast majority of sales might occur.

21 Do you recall that?

22 A. Yes.

23 Q. This is largely the subject of your
24 report; correct?

25 A. Right.